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Bib Data Sheet

CONFIRMATION NO. 7989

SERIAL NUMBER 10/810,169	FILING DATE 03/25/2004 RULE	CLASS 362	GROUP ART UNIT 2875	ATTORNEY DOCKET NO. LUM-PHNL030367
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APPLICANTS

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None M.T.

** CONTINUING DATA *****

Yes M.T.

** FOREIGN APPLICATIONS *****

EUROPEAN PATENT OFFICE (EPO) 03100816.2 03/28/2003
 EUROPEAN PATENT OFFICE (EPO) 03102348.4 07/30/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/05/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NETHERLANDS	SHEETS DRAWING 6	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance				
Verified and Acknowledged Examiner's Signature <i>M.T.</i> Initials M.T.				

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TITLE

Illumination system and display device

☐ All Fees☐ 1.16 Fees (Filing)

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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